

PLEASE TYPE OR PRINT

C

☐ Ms.

☒ Mr. Artist MICHAEL KATZ
(Last Name Last)

Permanent Address 612 W. MAIN, KENT
Street City

44240 Zip Tel. () 673-7400
Area Code

Temporary Address _____
Street City

Tel. () _____
Zip Area Code

Permanent address is in what county? PORTAGE

Born in Cuyahoga County ☐ Yes ☐ No

Collaborator _____
(If Any)

If entries are not accepted or not sold:

- ☒ Artist will pick up entries at Museum.
☐ Museum should dispose of entries.
☐ Museum should ship entries to artist C.O.D. at this address:

Check picked up - 7-13-73
to painting Michael Katz

The attached card will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed below.

It is also understood that accepted entries will remain on exhibition until June 10, 1973.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature Michael Katz

L

CATEGORY ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
ENTRY ONE ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

OIL

Title "FORMAL AIR SPACE"

Price or NFS

600 ⁰⁰

Insurance Value
If NFS Only

Size

48" X 70"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional
No. For Sale

Total No.
in Edition

Price
Unframed

Price
of Frames

Additional
No. of Frames
For Sale

DO NOT WRITE IN THIS SECTION

575 (1)

~~ACCEPTED~~

REJECTED

☒ FEE PAID

BY

PAID FEB 24 1973

CATEGORY ☐ 1. Paintings ☒ 2. Graphics ☐ 3. Photography
ENTRY TWO ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

FELT TIP PEN ON PAPER

Title LIGHT REALMS

Price or NFS

NFS

Insurance Value
If NFS Only

75 ⁰⁰

Size

23" X 25"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional
No. For Sale

Total No.
in Edition

Price
Unframed

Price
of Frames

Additional
No. of Frames
For Sale

DO NOT WRITE IN THIS SECTION

239 (2)

ACCEPTED

REJECTED

RECEIVED

BY

3/24

4/24

DO NOT DETACH

1973 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	MICHAEL KATZ
Address	612 W. MAIN
City & State	KENT, OHIO
	Zip 44240

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your
notification of acceptance or rejection.

CATEGORY ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
ENTRY ONE ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

OIL

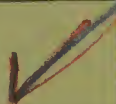
Title " FORMAL AIR SPACE "

DO NOT WRITE IN THIS SECTION

575 (1)

ACCEPTED

REJECTED



1973 MAY SHOW

Notification of Acceptance or Rejection

MICHAEL KATZ

Type or print name of artist

This is your only receipt to claim your object(s).

This notification will be mailed to you following judging.

DO NOT DETACH

CATEGORY ☐ 1. Paintings ☒ 2. Graphics ☐ 3. Photography
ENTRY TWO ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

FELT TIP PEN ON PAPER

Title LIGHT REALMS

DO NOT WRITE IN THIS SECTION

239 (2)

ACCEPTED

REJECTED

